

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Samuel M. Shaolian et al.) Group Art Unit: 3731
Appl. No. : 10/675,060)
Filed : September 30, 2003)
For : BIFURCATION GRAFT)
DEPLOYMENT CATHETER)
Examiner : Uyen T. Ho)

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

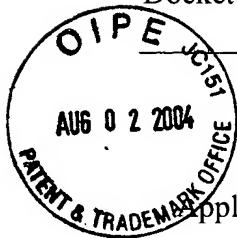
Dear Sir:

In response to the Office Action mailed April 30, 2004, please reconsider the above-captioned Application in light of the following amendments and remarks.

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of the claims which begins on page 3.

Remarks being on page 6 of this paper.



AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Samuel M. Shaolian et al.
 App. No. : 10/675,060
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 Art Unit : 3731

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

July 30, 2004

(Date)

Rabinder N. Narula, Reg. No. 53,371

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Amendment in 6 pages.
- (X) Terminal Disclaimer.
- (X) Information Disclosure Statement; PTO Form-1449 listing 89 references.
- (X) 20 references enclosed.
- (X) The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	12 - 20 = 0	2202 (\$9)	0 x 9 =	\$0
Independent Claims	2 - 3 = 0	2201 (\$43)	0 x 43 =	\$0
			TOTAL FEE DUE	\$*

- (X) A check in the amount of \$55 is enclosed.
- (X) Return prepaid postcard.

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- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



Rabinder N. Narula
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